

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<i>Attorney Docket No.</i>	
<i>First Inventor</i>	Jack J. Tucker, D.D.S.
<i>Title</i>	Removable Reinforcement Impression Tray
<i>Express Mail Label No.</i>	ER 041029729

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

- | | |
|--|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original and a duplicate for fee processing)</i> | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27. | 8. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i> |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 19]
<i>(preferred arrangement set forth below)</i> | a. <input type="checkbox"/> Computer Readable Form (CRF) |
| - Descriptive title of the invention | b. <input type="checkbox"/> Specification Sequence Listing on: |
| - Cross Reference to Related Applications | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or |
| - Statement Regarding Fed sponsored R & D | ii. <input type="checkbox"/> Paper |
| - Reference to sequence listing, a table, or a computer program listing appendix | c. <input type="checkbox"/> Statements verifying identity of above copies |
| - Background of the Invention | |
| - Brief Summary of the Invention | |
| - Brief Description of the Drawings (<i>if filed</i>) | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1] | |
| 5. Oath or Declaration [Total Sheets 2] | |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy) | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 18 completed)</i> | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of
<i>(when there is an assignee)</i> <input type="checkbox"/> Attorney |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting Inventor(s)
name in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b). | 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 |
| | 13. <input type="checkbox"/> Preliminary Amendment |
| | 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent. |
| | 17. <input type="checkbox"/> Other: |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: 10/288,740.....

Prior application information:

Examiner Ms. Melba Baumgarner

Art Unit: 3732

For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number:				OR	<input checked="" type="checkbox"/> Correspondence address below
Name	David A. Tucker c/o Dr. Jack J. Tucker				
Address	10306 Kings Grant Dr.				
City	San Antonio	State	Texas	Zip Code	78230
Country	USA	Telephone	832-647-8253	Fax	n/a
Name (Print/Type)	David A. Tucker	Registration No. (Attorney/Agent)			
Signature	David A. Tucker				Date November 8, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

10/705556



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 385)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Jack J. Tucker, D.D.S.
Examiner Name	
Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385			Utility filing fee	385
1002 340	2002 170			Design filing fee	
1003 530	2003 265			Plant filing fee	
1004 770	2004 385			Reissue filing fee	
1005 160	2005 80			Provisional filing fee	
SUBTOTAL (1) (\$ 385)					

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20** = 0	x 9	= 0
Independent Claims 3	- 3** = 0	x 43	= 0
Multiple Dependent			= 0

Large Entity	Small Entity	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0		

*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 420	2252 210			Extension for reply within second month	
1253 950	2253 475			Extension for reply within third month	
1254 1,480	2254 740			Extension for reply within fourth month	
1255 2,010	2255 1,005			Extension for reply within fifth month	
1401 330	2401 165			Notice of Appeal	
1402 330	2402 165			Filing a brief in support of an appeal	
1403 290	2403 145			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,330	2453 665			Petition to revive - unintentional	
1501 1,330	2501 665			Utility issue fee (or reissue)	
1502 480	2502 240			Design issue fee	
1503 640	2503 320			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180			Submission of Information Disclosure Stmt	
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	
1809 770	2809 385			Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385			For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$)	

(Complete if applicable)

Name (Print/Type)	David A. Tucker	Registration No. (Attorney/Agent)		Telephone 832-647-8253
Signature	David A. Tucker		Date	November 8, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

David A. Tucker

10306 Kings Grant Dr.
San Antonio, Texas 78230

◆
Phone: 832.647.8253
Email: davidatucker@yahoo.com

July 28, 2003

Mail Stop Patent Application
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Re: Patent Applications.

Dear Sir/Madam:

I enclose three separate patent applications with three separate \$385 checks.

These patents ~~are~~ ^{applications}:

- Reinforceable Impression Tray
- Method of Reinforcing Impression Tray
- Removable Reinforcement Impression Tray

These applications are continuations-in-part and divisional of our prior application number 10/288,740, titled, "Variable Rigidity Impression Tray," and originally filed August 27, 2002.

Please feel free to call me if you have any questions whatsoever. I thank you for your prompt attention to this matter.

Very truly yours,



David A. Tucker